

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

2013 APR 23 AM 7:57

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

RED FEAME CENTER

Erin McClelland for Congress

ADDRESS (number and street)

PO Box 2824

☒ (Check if address  
is changed)

Lower Burrell

CITY

PA

STATE

15068

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address  
is changed)

erin@erin14.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☒ (Check if address  
is changed)

www.erin14.com

2. DATE

03 / 12 / 2013

3. FEC IDENTIFICATION NUMBER



C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

David Lazear

Signature of Treasurer

David Lazear

Date

03 / 12 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

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